UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION IN SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMI

OMB APPROVAL

OMB Number: 3235-0076 Expires: March 30, 2008 Estimated average burden hours per form.....1

> SEC USE ONLY Serial

refix

DATE RECEIVED

Name of Offering (check if this is an ar	mendment and name has char	iged, ar	nd indicate change.)			
Common Stock						
Filing Under (Check box(es) that apply):	☐ Rule 504		☐ Rule 505	Rule 506 ■ Rule 506	Section 4(6)) ULOE
Type of Filing:		×	New Filing] Amendment	
	A. BA	SIC ID	ENTIFICATION DA	TA		
1. Enter the information requested about	t the issuer	•				····
Name of Issuer (☐ check if this is an ame	ndment and name has change	d, and	indicate change.)		•	
Nuevo Latino Natural Foods, Inc.	•					
Address of Executive Offices	(Number and S	Street, C	City, State, Zip Code)	Telephone Number	r (Including Area Co	ode) ·
1526 Spruce Street, Ste. 208 Boulder, CC	80302			303-564-8848		שרטפור
Address of Principal Business Operations	(Number and Street, City, Sta	te, Zip	Code)	Telephone Number	r (Including Area d	SED CESSED
(if different from Executive Offices)						
Brief Description of Business						<u> APR 1-1-2007 —</u>
Natural Food Products					D	THOMODAL
Type of Business Organization	·				·	THOMSON
⊠ corporation	☐ limited partnership, alrea	dy fori	ned		☐ other (please spe	FINANCIAL cify):
☐ business trust	limited partnership, to be	forme	d ,			•
;	<u></u>	<u> </u>	4onth Y	'ear		
Actual or Estimated Date of Incorporation	or Organization:	F	ebruary 2	007		
					■ Actual	☐ Estimated
Jurisdiction of Incorporation or Organization	•		Service abbreviation for	or State:		DE.
•	CN for Canada; FN fo	r oiner	toreign jurisdiction)			DE

GENERAL INSTRUCTIONS

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

> Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check ➤ Director, □ Promoter ■ Beneficial Owner Executive Officer General and/or Box(es) that Managing Partner Apply: Full Name (Last name first, if individual) James P. Hoagland Business or Residence Address (Number and Street, City, State, Zip Code) 1526 Spruce Street, Ste. 208 Boulder, CO 80302 Check □ Promoter ■ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Box(es) that Managing Partner Apply: Full Name (Last name first, if individual) Spring Storm Group, LLC Business or Residence Address (Number and Street, City, State, Zip Code) 70 Washington Street, #11D Brooklyn, NY 11201 Check ☐ Executive Officer ☐ General and/or , ☐ Promoter ☐ Beneficial Owner ☐ Director Box(es) that Managing Partner Apply: Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Boxes Director Promoter General and/or ☐ Beneficial Owner ☐ Executive Officer thai Apply: Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

☐ Executive Officer

☐ Director

☐ General and/or

Managing Partner

Check

Apply:

Box(es) that

☐ Promoter

Business or Residence Address (Number and Street, City, State, Zip Code)

Full Name (Last name first, if individual)

☐ Beneficial Owner

•					В	. INFORM	IATION AB	OUT OFFE	ERING				
1.	Has the i	ssuer sold, o	r does the issu	er intend to				_	; under ULOF	 L	•••••	Yes N	o <u>X</u>
2.	What is	the minimum	investment t	hat will be a	ccepted from	n any indivi	idual?		***************************************		************	\$ not ap	plicable
3.	Does the	offering per	mit joint owne	ership of a si	ngle unit?							Yes <u>X</u> N	· o
4.	'solicitati 'registere	on of purcha d with the SI	isers in conne	ection with h a state or s	sales of sec tates, list th	curities in the	ne offering. he broker or	If a person	to be listed	is an associate	ed person or	agent of a	emuneration for broker or dealer ersons of such a
N/A													
Full	Name (La	ast name first	, if individual	l)							<u> </u>		
Busi	iness or R	esidence Ado	dress (Number	r and Street.	City, State,	Zip Code)		· · · · · · · · · · · · · · · · · · ·					
Nam	ne of Asso	ciated Broke	r or Dealer				•						
			. 0										
State	es in Whi	ch Person Lis	sted Has Solic	ited or Inten	ds to Solici	t Purchasers	:						
(Che	eck "All S	tates" or che	ck individual	States)									All States
{AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]		[IN]	[IA]	[KS]	(KY)	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT	-	[NE]	[NV]	[NH]	[1/1]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
(RI)		[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[VA]	[WV]	[WI]	[WY]	[PR]
Full	Name (La	ast name first	, if individual	1)									
Busi	iness or R	esidence Ado	lress (Number	r and Street,	City, State,	Zip Code)							
Nan	ne of Asso	ciated Broke	r or Dealer										
State	es in Whic	ch Person Lis	ted Has Solic	ited or Inten	ds to Solici	1 Purchasers							
(Che	eck "All S	tates" or che	ck individual	States)				,					
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	· [GA]	[HI]	[ID]
[IL]		[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[[[[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]		[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[VA]	[WV]	[WI]	[WY]	[PR]
Full	Name (La	ast name first	, if individual)			-1						
Busi	iness or R	esidence Ado	lress (Number	r and Street,	City, State.	Zip Code)							
Nan	ne of Asso	ciated Broke	r, or Dealer	·-			· · · · · ·						
State	es in Whie	ch Person Lis	ated Has Solic	ited or Inten	ds to Solici	Purchasers						-	
•			ck individual							**********************			
AL		{AK}	[AZ]	[AR]	[CA]	[CO]	[CT]	(DE)	[DC]	(FL)	[GA]	[HI]	[ID]
iL)		(IN)	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	 [MO]
IMT		[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[R1]		[SC]	[SD]	[TN]	[TX]	ן עדן	[VT]	[VA]	[VA]	[WV]	(wi)	[WY]	[PR]

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS ter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "n

	Type of Security	Aggregate		Amount Already
	Debt	Offering Price		Sold \$
•	Equity	\$ \$ 100,000,00	-	\$ <u>100,000.00</u>
		\$ <u>100,000.00</u>	-	\$ 100,000,00
	Common Preferred	•		
	Convertible Securities (including warrants)	\$,	\$
	Partnership Interests	\$		\$
	Other (Specify)	\$	_	\$
	Total	\$ <u>100,000.00</u>	-	\$ <u>100,000.00</u>
	Answer also in Appendix, Column 3, if filing under ULOE.			
offering a	number of accredited and non-accredited investors who have purchased securities in this nd the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate per of persons who have purchased securities and the aggregate dollar amount of their on the total lines. Enter "0" if answer is "none" or "zero."			
		Number		Aggregate
1		Investors		Dollar Amount
	•			of Purchases
	Accredited Investors	<u> </u>	_	\$ <u>100,000.00</u>
	Non-accredited Investors			\$
,	Total (for filings under Rule 504 only)		_	\$
	Answer also in Appendix, Column 4, if filing under ULOE.		-	
sold by th	ng is for an offering under Rule 504 or 505, enter the information requested for all securities e issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first curities in this offering. Classify securities by type listed in Part C - Question 1.			
		Type of		Dollar Amount
		Security		Sold
	Type of Offering			
•	Rule 505		-	\$
	Regulation A		_	\$
	Rule 504.		-	\$
•	Total		_	\$
securities information	sh a statement of all expenses in connection with the issuance and distribution of the in this offering. Exclude amounts relating solely to organization expenses of the issuer. The on may be given as subject to future contingencies. If the amount of an expenditure is not mish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees			\$
1	Printing and Engraving Costs			\$
	Legal Fees		×	\$ 2,000.00
1	Accounting Fees			\$
	Engineering Fees		П	\$
	Sales Commissions (specify finders' fees separately)			s
	Other Expenses (Identify)			S
	Total		×	\$ 2,000.00

	STORS, EXPENSES AND U	SE OF PROCEEDS	
b. Enter the difference between the aggregate offering price given in responsin response to Part C – Question 4.a. This difference is the "adjusted gross"	se to Part C - Question 1 and to ss proceeds to the issuer"	otal expenses furnished	\$_98,000.00
5. Indicate below the amount of the adjusted gross proceeds to the issuer used of it the amount for any purpose is not known, furnish an estimate and check payments listed must equal the adjusted gross proceeds to the issuer set forth it.	the box to the left of the esti	mate. The total of the	
		Payment to Officers,	Payment To
Salaries and fees		Directors, & Affiliates	Others
Purchase of real estate	·		□ \$
Purchase, rental or leasing and installation of machinery and equipment	•		□ \$
Construction or leasing of plant buildings and facilities	_		□ \$
Acquisition of other businesses (including the value of securities involved in this] \$	□ \$
in exchange for the assets or securities of another issuer pursuant to a merger)] \$	□ \$
Repayment of indebtedness	······································] s	□ \$
Working capital	-] \$	\$ 98,000.00
Other (specify):] \$	□ \$
			□ \$
Column Totals	=		\$ 98,000.00
Total Payments Listed (column totals added)		- ↓ <u> </u>	
	· .		
D. FEDERA	L SIGNATURE		:
The issuer had duly caused this notice to be signed by the undersigned duly author		led under Rule 505, the fo	Howing cianature constitutes
an undertaking by the issuer to furnish to the U.S. Securities and Exchange Comm			
I non-accredited investor pursuant to paragraph (b)(2) of Rule 502			umished by the issuer to any
non-accredited investor pursuant to paragraph (b)(2) of Rule 502. Issuer (Print or Type) Sig	nature		Date
	nature P. Hard		
Issuer (Print or Type) Nuevo Latino Natural Foods, Inc.	Jans & Hray		Date
tssuer (Print or Type) Nuevo Latino Natural Foods, Inc. Name of Signer (Print or Type)	Jans P Hrayl le di Signer (Print or Type)		Date
tssuer (Print or Type) Nuevo Latino Natural Foods, Inc. Name of Signer (Print or Type)	Jans & Hray		Date
tssuer (Print or Type) Nuevo Latino Natural Foods, Inc. Name of Signer (Print or Type)	Jans P Hrayl le di Signer (Print or Type)		Date
tssuer (Print or Type) Nuevo Latino Natural Foods, Inc. Name of Signer (Print or Type)	Jans P Hrayl le di Signer (Print or Type)		Date
tssuer (Print or Type) Nuevo Latino Natural Foods, Inc. Name of Signer (Print or Type)	Jans P Hrayl le di Signer (Print or Type)		Date
tssuer (Print or Type) Nuevo Latino Natural Foods, Inc. Name of Signer (Print or Type)	Jans P Hrayl le di Signer (Print or Type)		Date
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tssuer (Print or Type) Nuevo Latino Natural Foods, Inc. Name of Signer (Print or Type)	Jans P Hrayl le di Signer (Print or Type)		Date
tssuer (Print or Type) Nuevo Latino Natural Foods, Inc. Name of Signer (Print or Type)	Jans P Hrayl le di Signer (Print or Type)		Date
Issuer (Print or Type) Nuevo Latino Natural Foods, Inc. Name of Signer (Print or Type) James P. Hoagland Pre	De di Signer (Print or Type) Sident		Date

E. STATE SIGNATURE	· · · · · · · · · · · · · · · · · · ·	
1. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No 🗷
See Appendix, Column 5, for state response.		
The undersigned issuer hereby undertakes to furnish to the state administrator of any state in which the notice is filed, a notice on Form such times as required by state law.	D (17 CFR 2	239.500)
3. The undersigned issuer hereby undertakes to furnish to any state administrators, upon written request, information furnished by the issuer to	offerees.	
4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform lim (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden conditions have been satisfied.		
(ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden conditions have been satisfied.	of establishing	that the
(ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden conditions have been satisfied. The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the und	of establishing	that the
(ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden conditions have been satisfied. The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the und person. Issuer (Print or Type) Signature	of establishing ersigned duly	that the
(ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden conditions have been satisfied. The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the und person. Issuer (Print or Type) Signature	of establishing ersigned duly	that the
(ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden conditions have been satisfied. The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undberson. Issuer (Print or Type) Nuevo Latino Natural Foods, Inc. Signature P. Howard Apr	of establishing ersigned duly te	that the
(ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden conditions have been satisfied. The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undberson. Issuer (Print or Type) Nuevo Latino Natural Foods, Inc. Signature P. Howard Apr	of establishing ersigned duly te	that the

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				APPENDIX						
1,		2	3		5					
,	to non-a investor	l to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	rte ce Type of investor and amount purchased in State			amount purchased in State			
State	Yes	No		Number of Accredited Investors	Amount .	Number of Non- Accredi ted Investor s	Amount	Yes	No	
NY		Х	Common Stock \$100,000.00		\$100,000.00	0				